Date: Oct 26,20	21
Your Name: Yua	inkang Xie
Manuscript Title	e: Primary colon natural killer (NK)/T-cell lymphoma, nasal type, with perforations: A case report
	and literature review
Manuscrint nur	phor (if known):

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

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		Time frame: Since the initial	planning of the work
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) No time limit for this item.	None	
		Time frame: past	36 months
2	Grants or contracts from any entity (if not indicated in item #1 above).	√_None	
3	Royalties or licenses	√_None	
4	Consulting fees	<u>V</u> None	

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5	Payment or honoraria for lectures, presentations, speakers bureaus,	<u>V</u> None	
	manuscript writing or educational events		
6	Payment for expert testimony	√_None	
7	Support for attending meetings and/or travel	√_None	
8	Patents planned, issued or	<u>√</u> None	
	pending		
9	Participation on a Data	<u>√</u> _None	
	Safety Monitoring Board or		
	Advisory Board		
10	Leadership or fiduciary role	<u>√</u> _None	
	in other board, society,		
	committee or advocacy group, paid or unpaid		
11	Stock or stock options	√_None	
12	Receipt of equipment,	√_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>√</u> None	
	financial interests		

None.		

Please place an "X" next to the following statement to indicate your agreement:

Date: Oct 26,20	21
Your Name: Yuv	ven Liu
Manuscript Title	e: Primary colon natural killer (NK)/T-cell lymphoma, nasal type, with perforations: A case report
	and literature review
Manuscript nun	nber (if known):

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12	Receipt of equipment,	√_None	
	materials, drugs, medical		
	writing, gifts or other		
	services		
13	Other financial or non-	<u>√</u> None	
	financial interests		

None.		

Please place an "X" next to the following statement to indicate your agreement:

Date: Oct 26,20	21
Your Name: Cha	o Wen
Manuscript Title	: Primary colon natural killer (NK)/T-cell lymphoma, nasal type, with perforations: A case report
-	and literature review
Manuscript num	ber (if known):

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	writing, gifts or other		
	services		
13	Other financial or non-	<u>√</u> None	
	financial interests		

N	ne.

Please place an "X" next to the following statement to indicate your agreement:

Date: Oct 26,202	1
Your Name: Wen	long Li
Manuscript Title:	Primary colon natural killer (NK)/T-cell lymphoma, nasal type, with perforations: A case report
	and literature review
Manuscript num	per (if known):

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	financial interests		

N	ne.

Please place an "X" next to the following statement to indicate your agreement:

Date: <u>Oct 26,20</u>	21
Your Name: <u>Xia</u>	oliang Lu
Manuscript Titl	e: Primary colon natural killer (NK)/T-cell lymphoma, nasal type, with perforations: A case report
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Manuscript nur	nber (if known):

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